PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

500.38315 811

TOTAL CLAIMS	CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
TOTAL CHARGEABLE CLAIMS	ΤO	TAL CLAIME		(Column 1)		(Column 2)		7		OR		SMALL ENTITY		
TOTAL CHARGEABLE CLAIMS	TOTAL CLAIMS			,					RATE	FEE				
MULTIPLE DEPENDENT CLAIMS	FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
MULTIPLE DEPENDENT CLAIM PRESENT	TOTAL CHARGEABLE CLAIMS			7 minus 20=		* D			X\$ 9=		OR	X\$18=		
### ### ### #### #####################						* 12			X42=		OR	X84=		
CLAIMS AS AMENDED - PART II	MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=		
Column 1 Column 2 Column 3 SMALL ENTITY OR SMALL ENTITY	* If the difference in column 1 is less than zero, enter "0" in co						olumn 2	Ĺ	TOTAL		OR	TOTAL		
COLIMING REMAINING REMAI	CLAIMS AS AMENDED - PART II								'		•	OTHER	THAN	
REMAINING								SMALL ENTITY			OR	SMALL	ENTITY	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	NDMENT A		REMAINING AFTER		NUMI PREVIO	BER OUSLY			RATE	TIONAL		RATE	TIONAL	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		Total	*	Minus	**		=	1	X\$ 9=		OR	X\$18=		
Column 1) Column 2 Column 3 Column 3 Column 3 Column 4 Column 5	AME		<u> </u>		<u> </u>	- CLAINA	=	ſ	X42=		OR	X84=		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST NUMBER PREVIOUSLY PAID FOR	TINGT PRESENTATION OF MIDELTIPLE DEPENDENT CLAIM								+140=		OR	+280=		
Column 1) Column 2) Column 3 RATE ADDI- TIONAL FEE ADDI- TIONAL FEE TIONAL											OR			
Total * Minus *** =			(Column 1)		(Colur	mn 2\	(Column 3)	F	AUUII. FEE [הטטוו. דבבן		
TOTAL ADDIT. FEE OR +280= OR TOTAL ADDIT. FEE TOTAL ADDIT. FE			CLAIMS REMAINING AFTER		HIGH NUM PREVIO	HEST IBER OUSLY	PRESENT		RATE	TIONAL		RATE	TIONAL	
TOTAL ADDIT. FEE OR +280= OR TOTAL ADDIT. FEE TOTAL ADDIT. FE	MON	Total	*	Minus	**		=	 	X\$ 9=		OR	X\$18=		
TOTAL ADDIT. FEE OR +280= OR TOTAL ADDIT. FEE TOTAL ADDIT. FE	ME	<u> </u>	<u> </u>	<u>.l</u>	<u> </u>		=	 	X42=			X84=		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST NUMBER PREVIOUSLY EXTRA AFTER AMENDMENT PAID FOR PAID FOR PAID FOR PAID FOR PREVIOUSLY EXTRA Independent * Minus *** = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the entry in column 1 is less than the entry in column 3, enter "20." * ADDIT. FEE OR TOTAL ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						!	1140-		1 1	1280		
CLAIMS REMAINING AFTER AMENDMENT Total Independent * Minus *** = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								Ł						
CLAIMS REMAINING AFTER AMENDMENT Total Independent * Minus *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." PRESENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM ADDITATIONAL FEE X\$ 9= NATE ADDITATIONAL FEE AD			A	ADDIT. FEE		OR	ADDIT. FEE							
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THE MINNES NUMBER PREVIOUSLY PAID FOR LINIAL OF INDEPENDENT IS THE HIGHEST NUMBER TOUGH IN THE SOMEONISTS NOV IN COLUMN 1	**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEEOR												